

**LEGISLATIVE SERVICES AGENCY  
OFFICE OF FISCAL AND MANAGEMENT ANALYSIS**

200 W. Washington, Suite 301  
Indianapolis, IN 46204  
(317) 233-0696  
<http://www.in.gov/legislative>

**FISCAL IMPACT STATEMENT**

**LS 7335**

**BILL NUMBER: SB 406**

**NOTE PREPARED: Feb 9, 2015**

**BILL AMENDED: Feb 9, 2015**

**SUBJECT:** Prescription for an Overdose Intervention Drug.

**FIRST AUTHOR:** Sen. Merritt

**FIRST SPONSOR:**

**BILL STATUS:** 2nd Reading - 1st House

**FUNDS AFFECTED:**  GENERAL  
 DEDICATED  
 FEDERAL

**IMPACT:** State & local

**Summary of Legislation:** (Amended) This bill allows specified health care professionals with prescriptive authority to dispense or write a prescription for an overdose intervention drug (naloxone) without examining the individual to whom it may be administered if specified conditions are met.

The bill allows for an individual who is person at risk, a family member, friend, or other individual in a position to assist another individual who, there is reason to believe, is at risk of experiencing an opioid-related overdose, to obtain and administer an overdose intervention drug if certain conditions are met.

The bill requires a pharmacy that fills a prescription for an overdose intervention drug to report certain information to the INSPECT program. It includes naloxone to be reported to the INSPECT program.

The bill requires certain ambulances and emergency medical services vehicles to be equipped with an overdose intervention drug.

The bill also provides for civil and criminal immunity.

**Effective Date:** July 1, 2015.

**Explanation of State Expenditures:** (Revised) The bill would require revisions or promulgation of rules by the Medical Licensing Board, State Board of Nursing, and the Board of Pharmacy to reflect the provisions of the bill in the prescribing and dispensing rules. The rule adoption process is considered to be a core function of the Professional Licensing Agency (PLA) and should be accomplished within the current level of resources available to the PLA.

The bill also requires that a pharmacy dispensing naloxone report the specified required data to the INSPECT program. The INSPECT program will be required to include the reported naloxone data in a searchable data base that is required to be maintained by INSPECT. This requirement should be accomplished within the current level of resources available to INSPECT.

The bill would also require that each ambulance and emergency medical services vehicle must be equipped with naloxone after December 31, 2015. The number of emergency medical services vehicles is not known at this time. The fiscal impact of this provision would depend on the number of vehicles and the extent to which these vehicles may already be supplied with this product.

The bill allows administration of naloxone to be prescribed or dispensed to trained individuals who would be administering it to another individual who may be at risk of overdosing on an opioid drug. The intranasal form of naloxone costs about \$40 to \$50. The FDA-approved autoinjector costs approximated \$600. The bill does not address who the payer will be for the drug. Naloxone is a covered drug for Medicaid and the state employee health Plans. If a prescription is written for one person covered by a benefit plan, it is not clear whether that plan will provide payment for a product intended for use by a third party who may or may not be covered by that benefit plan. The cost to Medicaid and to the state employee health plans would depend on how this situation is treated and the extent of the third party prescribing for the two products.

**Explanation of State Revenues:**

**Explanation of Local Expenditures:** [See *Explanation of State Expenditures.*]

**Explanation of Local Revenues:**

**State Agencies Affected:** Professional Licensing Agency and potentially Family and Social Services Administration (FSSA) and the State Personnel Department.

**Local Agencies Affected:** Local units of government offering employee health insurance benefits.

**Information Sources:** FSSA, State Personnel Department, GoodRX.com, and "Naloxone, a Drug to Stop Heroin Deaths, is More Costly, Police Say," New York Times, November 30, 2014, at: [http://www.nytimes.com/2014/12/01/nyregion/prices-increase-for-antidote-to-heroin-overdoses-used-by-police.html?\\_r=0](http://www.nytimes.com/2014/12/01/nyregion/prices-increase-for-antidote-to-heroin-overdoses-used-by-police.html?_r=0)

**Fiscal Analyst:** Kathy Norris, 317-234-1360.